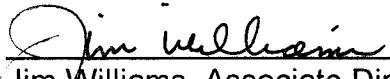


**Court Services and Offender Supervision Agency**  
**for the District of Columbia**  
*Management and Administration*

**Subject:** Employee Transit Subsidy

**Authority:** Executive Order 13150, April 21, 2000  
Federal Workforce Transportation

**Effective Date:** October 1, 2000

**Approved:**   
Jim Williams, Associate Director  
Management and Administration

## **I. INTRODUCTION**

On April 21, 2000, President Clinton issued Executive Order 13150 on Federal Workforce Transportation. This Executive Order directs all federal agencies, beginning in FY 2001, to offer qualified federal employees a "transit pass" transportation fringe benefit program "in amounts approximately equal to an employee's mass transit commuting costs, not to exceed the maximum level allowed by law." Currently CSOSA offers employees Metrochek for up to \$50 per month of qualified mass transit commuting costs. Effective October 1, 2000, the maximum allowable amount increases to \$65 per month or the cost of commuting whichever is less.

## **II. COVERAGE**

This policy applies to all individuals employed by CSOSA in the Washington, DC Metro area who use mass transit to commute to work on a regular basis.

## **III. POLICY**

### **A. ELIGIBILITY**

Each CSOSA employee who participates in the Washington Metropolitan Area Transit Authority (WMATA) transit subsidy program (MetroPool), must certify quarterly that they will personally use the vouchers to subsidize their commute to and from work. The Pretrial Services Agency will issue separate guidance on this subject.

## **B. CERTIFICATION**

Each MetroPool participant must complete and sign an individual Metrochek Request form quarterly that certifies the total cost per month of his/her commute to and from work (Attachment 1).

Each MetroPool participant must have a current Metrochek Request form on file with the office responsible for ordering the vouchers.

- 1) This quarterly certification must include the name of the employee, CSOSA organization, the method of transportation used, the cost each way, and the total cost for one month.
- 2) The employee and his/her supervisor must sign the quarterly certification.
- 3) Any changes to the employee's cost per month should be forwarded to his/her supervisor immediately, and a copy should be forwarded to the office responsible for ordering the vouchers.

Any employee that abuses the privilege of participation in the transit subsidy program may be subject to disciplinary action, up to and including removal.

## **C. AMOUNT**

The benefit will be offered in the form of Metrochek transit vouchers not to exceed \$65 per month per employee who uses WMATA public transportation. For example, although a participant's commuting cost using a WMATA transit provider is \$75 per month, the benefit amount offered is only \$65 per month. A ten percent (10%) bonus is given on all Metrochek farecard vouchers valued at \$20 or more. The bonus is not counted in determining the amount received by each employee.

The monthly Metrochek amount will not exceed the participant's actual cost per month. For example, if a participant's commuting cost using a WMATA transit provider is \$25 per month, then the benefit amount provided will be \$25 per month.

The vouchers will be rounded up to the nearest \$5 increment. For example, if a participant requires \$36 per month, the amount that will be provided is \$40 per month.

Each participant's monthly cost is based on a 20 workday month. For example, if a participant spends \$2.20 per day commuting to and from work, multiply that amount by 20 to calculate the monthly total, or  $\$2.20 \times 20 = \$44$  (which will be rounded up to \$45).

Parking and other non-MetroPool transit costs may not be included in determining an employee's daily costs.

This transit subsidy is a tax-free benefit to employees.

#### **D. DISBURSEMENT PROCEDURES**

The Office of Financial Management is responsible for coordinating distribution of the vouchers for CSOSA. The Community Supervision Administrative Office is responsible for coordinating distribution of the Metrochek vouchers for the Community Services Division. The vouchers will be delivered monthly by WMATA via Procurement to the Office of Financial Management and the Community Supervision Administrative Office for distribution to program participants.

It is the responsibility of each participant to exchange his/her Metrochek vouchers for bus passes and/or tokens as needed. The distributing offices will provide Metrocheks only.

Metrochek vouchers should be ordered no later than the 15<sup>th</sup> of every month to allow for timely distribution. **Vouchers will be distributed within the last week of each month for the following month. Late distribution is only available when an employee is on leave or travel status during the normal distribution period.**

The distributing office will maintain a spreadsheet for each month that lists the employee names and amounts distributed (Attachment 2). Each employee will sign the spreadsheet to document receipt. For field locations, not co-located with the distribution office, a separate spreadsheet will be maintained and vouchers picked up by an employee of the field office. The individual designated for distribution at the field office will secure the signatures of participants on the spreadsheet and return it along with any vouchers not distributed.

Employees with distribution responsibility will ensure that all Metrochek vouchers and distribution spreadsheets are secured in a locked safe or file cabinet at all times.

The vouchers will only be distributed to the actual program participant. Supervisors and/or other employees are not authorized to receive Metrocheks on behalf of anyone else.

After all vouchers have been distributed, a copy of each spreadsheet that documents receipt shall be provided to the Financial Management Office.

## **E. AGENCY PROGRAM COORDINATOR**

The Program Coordinators are Joyce Bynum, CSOSA, Office of Financial Management, 202-220-5715, 633 Indiana Avenue, NW, Room 1376 and Theresa Doughty, Community Supervision Administrative Office, 202-585-7311, 300 Indiana Avenue, NW, Room 2077.

## METROCHEK REQUEST

Month: \_\_\_\_\_

Employee Name: \_\_\_\_\_

CSOSA Organization: \_\_\_\_\_

1. Name of Transportation provider (e.g. Metro rail, MARC, VRE, Metro bus).

\_\_\_\_\_

2. Number of days each month you commute by Public Transportation.

\_\_\_\_\_

3. List your AM and PM commute and the cost of each portion of the trip.

Morning Commute:

\_\_\_\_\_

Evening Commute:

\_\_\_\_\_

### EXAMPLE:

Morning Commute:

Pentagon to Gallery Place/Chinatown \$1.10

Evening Commute:

Gallery Place/Chinatown to Pentagon \$1.10

I certify that the above information is accurate and complete and that Metro check vouchers will be used solely for my commute to work.

EMPLOYEE SIGNATURE: \_\_\_\_\_

SUPERVISOR SIGNATURE: \_\_\_\_\_

DATE COMPLETED \_\_\_\_\_